



## PRELIMINARY AMENDMENT

Application #	09/848,418
Confirmation #	7802
Filing Date	05/04/2001
First Inventor	Haggett
Art Unit	1752
Examiner	H.V. Le
Docket #	P07193US00/RFH

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

SIR:

Responsive to the Advisory Action mailed on March 2, 2004:

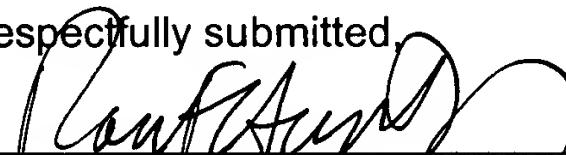
A) please consider the responsive **Remarks** provided herewith in **Attachment A**; and

B) please amend the above identified application as follows:

- **Amendments to the Claims** are reflected in the listing of the claims provided herewith in **Attachment B**.

It is respectfully submitted that the application is now in condition for allowance.

Respectfully submitted,

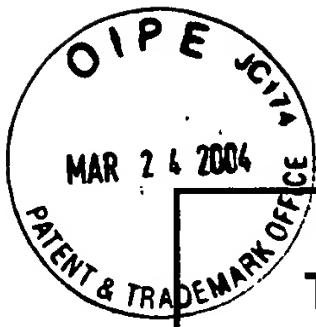


By: Ross F. Hunt, Jr.

Registration No.: 24,082

Date: March 23, 2004

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MAR 24 2004

Customized PTO/SB/21 (05-03)

## TRANSMITTAL FORM

(for all correspondence after initial filing)

Total number of pages in this submission =

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## ENCLOSURES (check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Fees calculated below            | <input type="checkbox"/> Certified Copy of Priority Document(s) |
| <input checked="" type="checkbox"/> Preliminary Amendment | <input type="checkbox"/> Drawings                               |
| <input type="checkbox"/> including Attachment(s)          | <input type="checkbox"/> Information Disclosure Statement       |
| <input type="checkbox"/> After Final Amendment/Reply      | <input type="checkbox"/> Drawings                               |
| <input type="checkbox"/> including Attachment(s)          | <input type="checkbox"/> Terminal Disclaimer                    |
| <input type="checkbox"/> Extension of Time Petition       | <input type="checkbox"/>  |
| <input type="checkbox"/> Other:                           | <input type="checkbox"/>  |

## FEES CALCULATION: For claims if required and/or other fees as shown below:

	NOW	Previously Paid For	Present Extra	Rate	\$
<input checked="" type="checkbox"/> TOTAL CLAIMS	12	20	0	X \$ 18 =	
<input checked="" type="checkbox"/> INDEP. CLAIMS	1	3	0	X \$ 86 =	
TOTAL OF ABOVE CLAIMS FEES =					0
Reduction by ½ for small entity status of applicant					SUBTOTAL = 0
Fee for extension of time (per attached Petition)					
Other fee for					
TOTAL OF ALL FEES =					0

A check in the amount of \$0 is enclosed. If no payment or an insufficient payment is enclosed and a fee is due in connection herewith, the Commissioner is authorized to charge any fee or additional fee due in connection herewith to Deposit Account No. 12-0555.

In the event that a petition for extension of time is required to be submitted herewith and that a separate petition is not submitted herewith, applicant hereby petitions under 37 CFR 1.136(a) for an extension of time of as many months as are required to render this submission timely. Any fee is authorized above.

Date: March 24, 2004

  
By: Ross F. Hunt, Jr.  
Registration No.: 24,082

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